Indian Railways *vis-a-vis* performance the world over.

ताकि लोगों को सही जानकारी प्राप्त हो सके।

SHRI GOPALSINH G. SOLANKI: So far as the ratio of accidents is concerned, there were five committees which were set up earlier before 1988. Presently the Railways Safety Committee is headed by Justice Khanna. When we are talking much of accidents, I remember a judgement in which it was commented that formerly it was new and unique but we were surprised to know about railway accidents now when everyday it has become a routine where we come across railway accidents when we read newspapers. In the past, we also found that the accidents occurred because of human error. After that some other new aspect has come and it is because of technology. We find, just before 3-4 days there is a new invention or research which has been made. It may be because of fracture of rail welding and rail fractures. The Committee which has been headed by Justice Khanna and I would like to know whether there is any aspect to modernise the signal system. Secondly, wherther that particular committee consists of experts so far as railway accident prevention is concerned.

श्री नीतीश कुमार: सर, जस्टिस खन्ना कमेटी का जो टर्म्स आफ प्रिफरेन्स है उसमें ये सारी चीजें हैं। हमको बेहत्तर टेक्नोलोजी एडोप्ट करनी है। बहुत सारे विषय विचाराधीन हैं। सिग्नल सिस्टम में इम्प्रूवमेंट के लिए सतत् प्रयास किया जा रहा है। अभी दो दिन पहले इसी सदन में सारे बिन्दुओं पर चर्चा हुई है। इसके पहले खन्ना एक्सिडेंट के जवाब में भी मैंने कहा है कि सिग्नल सिस्टम के इम्प्रूवेमेंट की जरूरत है। जितना पैसा उपलब्ध है उसके हिसाब है हम इम्प्रूवमेंट की ओर बढ़ रहे हैं। इसकी और लगतार प्रयास किया जा रहा है। खन्ना कमेटी की रिपोर्ट जब आएगी उसके आधार पर भी और बेहतर क्या इम्प्रूवमेंट कर सकते हैं, इसके बारे में विचार करेंगे । जहां तक खन्ना कमेटी के कम्पोजिशन के बारे में माननीय सदस्य ने पूछा है, इसके बारे में मैं बताना चाहूंगा कि इसके अध्यक्ष जस्टिस एच० आर० खन्ना हैं। इसमें दो सांसद भी हैं। श्री वी० धनंजय कुमार, मेम्बर पार्लियामेंट लोकसभा और अनन्त सेठी, मेम्बर आप. पार्लियामेंट राज्य सभा हैं। इनके अतिरिक्त सी० एल० काव, रिटायर्ड चेयरमैन रेलवे बोर्ड, एल० के० सिन्हा, रिटायर्ड मेम्बर (मैकेनिकल) रेलवे बोर्ड, एस० एम० वैश, रिटायर्ड जनरल मैनेजर नार्दन रेलवे, वी० एस० दत्त, कमिश्नर आफ रेलवे सेफ्टी नार्दन सर्कल, डा० विनोद चन्द्र, प्रोफेसर डिपाटरमेंट आफ इलैक्ट्रानिक इंजीनियरिंग, आई० आई० टी० दिल्ली हैं। ये इसके मेम्बर हैं। इसके अलावा यह कमेटी जिनको भी बुलाना चाहे, उनको बुला सकती है। इसके साथ ही हम लोगों ने रिव्यू के सिलसिले में फैसला किया है कि सिग्नल और टेलीकाम के किसी एक्सपर्ट को इसमें बुलाना चाहें तो यह कमेटी कोआए कर सकती है और इसको एक्सपेंड कर सकती है।

Malaria Control Programme

*284. DR. B. B. DUTTA: will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a conference of Eastern Region Health Ministers was held recently at Calcutta;

(b) if so, the issues discussed in the said conference;

(c) whether Government have launched an enhanced Malaria Control Project to curb the incidence of Malaria in the North-East and in Eastern States of Bihar, Orissa and West Bengal; and

(d) if so, the details thereof?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) to (d) A statement is laid on the table of the House.

Statement

(a) and (b) Yes, Sir. A Conference of Eastern Region Health Ministers was held at Calcutta on 5-6th November, 1998. The agenda included discussions on the National Health Policy, the implementation of National Health Programmes, medical education, public health, family welfare and ISM etc.

(c) and (d) Seven North Eastern States have been covered under 100% central

assistance w.e.f. December, 1994 for the intensification of anti-malaria acitivities. Under the enhanced Malaria Control Project, 10 districts of Bihar, 22 districts of Orissa and one town each in the States of Bihar, Orissa and Calcutta city of West Bengal have been included in the project. However, the project activities can also be extended to other areas which on demographic and epidemological basis can be justified as needy.

Manpower development, enhanced information, education and communication activities and improved Management Information System are some of the components which cover the entire country under the enhanced Malaria Control Project, being implemented with World Bank assistance.

DR. B. B. DUTTA: Sir, my question was about the North-Eastern States. I wanted to know whether these States have been convered under the enhanced Malaria Control Project. The Minister has stated in his answer that under the enhanced Malaria Control Project, 10 districts of Bihar, 22 districts of Orissa and one town each in the States of Bihar, Orissa and Calcutta city of West Bengal have been included in the Project. About the North-East the Minister has stated that anti-malarial activities have been convered by 100 percent assistance. Does it mean that these States have not been included in the enhanced Malaria Control Project?

SHRI DALIT EZHILMALAI: Sir, the formulation of enhanced Malaria Control Project was worked out long back in 1992 and it concluded in 1995-96. Thereafter, the World Health Organisation has been coordinating one programme on an experimental basis in 100 districts of the country. This programme covers 1045 PHCs. There are 90 cities and towns which have been included in this programme which is going on an experimental basis. So, this is the position. This programme has been covering the whole country for a long time. The enhanced Malaria Control Project is confined to only 100 districts on an experimental basis.

DR. B. B. DUTTA: Sir, the name of this programme is being changed from time to time. When it was started in 1953, it was called the Malaria Control Project Programme. In 1958 this name was changed to Malaria Eradication Programme because there were encouraging results from this project and the number of affected persons came down to less than one lakh. In 1976, it was found that this number had shot up to 64.7 lakh. At that time, the Modified Plan Operation was launched and the number of affected persons came down to 22 lakhs. Since 1984 this number has stabilised between 22 lakhs and 30 lakhs. I do not understand what those activities are which are being carried on for eradicating malaria because it has stabilised at a level between 22 lakhs and 30 lakhs. Therefore, I would like to know whether the Government is going to eradicate malaria completely. Sir, the name is being changed, the means are being changed. But, what is the actual objective? Are you going to eradicate malaria, or do you want to keep at the same level of 22 lakh to 30 lakhs?

Sir, my second supplementary is with regard to two companies which are producing anti-malaria medicines and one of them is known as Bengal Immunity and the others Smith Stanistreet. These companies have specialised in producing anti-malaria drugs. They are not receiving any order. They are supposed to cater to the needs of the Eastern and the North-Eastern Regions. What activities will they carry out, if they do not have orders? The number of affected people is on the rise.

SHRI DALIT EZHILMALAI: Sir, the hon. Member asked about the change of names and the results thereafter. We do not see that any change in the name will bring about any change in the field. Of course, the Government is aiming for a

complete eradication. Keeping that in view, we started the preventive activities. Therefore, the preventive activity is continuing since, as it has been rightly said by our hon. friend, 1953. Right. The number that has been standing between 23 lakhs and 30 lakhs, is holding now. In fact, we are discussing about control prevention and eradication of malaria, the name you are worried about. The people in the Ministry and friends attending conferences suggest that eradication of malaria is possible. But, we feel, yes, if we start working towards eradication of malaria, at least, we meet with success, next to prevention of malaria. That is where we are standing. That is what we are working out. Therefore, change in name needs to be reviewed and re-looked. The Government is committed and bound to eradicate malaria. Time is the factor as to when it is going to happen. It is a different matter. But we are concerned about that. About supply of material and assistance from the Central Government, I would like to submit that material will be supplied by the Central Government and the State Government concerned should bear 50 per cent and the remaining 50 per cent will be borne by the Central Government. So, it is 50:50. With regard to eradication of malaria, it is equally shared by the respective State Governments with the Central Government. But, unfortunately, certain States, when we supply material, do not even take delivery. They refuse to pay even the freight charges. This is what is happening with some of the States in the North-Eastern Region. That is the position. Therefore, our activity is to continue and we are working with steadfast interest to control malaria absolutely, if not eradicate, at the immediate moment.

DR. B. B. DUTTA: Sir, there are some programmes of which the Central Government has taken direct charge. With World Bank's assistance, you are conducting programmes with regard to communicable, non-communicable and some major diseases throughout the country. You should not pass the buck on to State Governments saying that the State Governments are not taking delivery and not doing this and that. It is the duty of the Central Government to do that. Then, you have not replied to part (b) of my supplementary.

SHRI DALIT EZHILMALAI: I am giving you the position in the Government. Sir, with regard to malaria 50 per cent of the burden has to be borne by the State Government concerned and the remaining 50 per cent has to be borne by the Union Government. If the hon. Member wants to know about national programmes like, AIDS, tuberculosis, cancer or any other disease, I need a separate notice.

SHRI JIBON ROY: Sir, part (b) of the supplementary has not been answered.

SHRI MD. SALIM: He is asking about part (b) of the supplementary.

MR. CHAIRMAN: He has put another question. It is part (b) of the supplementary. You have not answered that. That is the Question ...(*interruptions*)...

SHRI DALIT EZHILMALAI: Sir, I request him to repeat the question ...(*interruptions*)...

DR. B. B. DUTTA: Sir, I have mentioned the names of two firms which have specialised in the production of anti-malarial drugs. They are functioning below their capacity. The capacity in those firms is lying idle. No orders are being placed on them. They are Bengal Immunity and Smith Stanistreet. So, what does it mean?

SHRI DALIT EZHILMALAI: Sir, this question does not relate to the main question. Therefore, I cannot reply ...(*interruptions*)... If the hon. Member wants to know about it, I need a separate notice ...(*interruptions*)...

DR. B. B. DUTTA: Sir, they are connected with the anti-malaria activity ...(*interruptions*)...

MR. CHAIRMAN: Basically, the question is relevant. He says that you are fully inchanrge of looking into it and the companies that are manufacturing anti-malaria drugs are running below their capacity because you are not giving them orders. That is the issue. ...(*interruptions*)... For this, no separate notice is required.

SHRI DALIT EZHILMALAI: If the hon. Member wants about supply, production, ...(*interruptions*)...

MR. CHAIRMAN: No, no. He has put a very specific question which you are not answering. Is it a fact that you are not giving proper orders to the companies which the manufacturing anti-malaria drugs? Then, how can you use them when you do not have ...(*interruptions*)...

SHRI DALIT EZHILMALAI: Sir, we do not have inadequacy in our supply to the respective States. Therefore, I may tell you that the material supplied by the ...(*interruptions*)...

SHRI MD. SALIM: Sir, how can they protect the people from malaria when ...(*interruptions*)...

MR. CHAIRMAN: You please find it out and give an answer to him. Question Hour is over.

WRITTEN ANSWERS TO STARRED QUESTIONS

Sale of MBBS Degrees in Delhi

*285. SHRI SANJAY NIRUPAM: will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that MBBS degrees are being sold for Rs. 5,000 in Delhi, as reported in The Hindustan Times of 22nd September, 1998;

(b) if so, what action has been taken or is proposed to be taken by Government to check this racket;

(c) whether such rackets have been reported in other parts of the country also; and

(d) if so, the details in this regard and the action taken in the matter?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI DALIT EZHILMALAI): (a) The newspaper report which appeared in the Hindustan Times in September, 1998 alleging that MBBS degrees are being sold in Delhi for Rs. 5000/- has come to the notice of the Government. However, in the absence of full details of persons or institutions selling such degrees it is difficult to initiate specific action. The Medical Council of India and the Government of National Capital Territory of Delhi have also intimated that they have no specific information about these complaints. However, in order to eliminate such unfair practice the University Grants Commission, the Association of Indian Universities and the Monopolies and Restrictive Trade Practices Commission keep a watch on the existence of fake universities functioning in contravention of the University Grants Commission Act, 1956.

(b) to (d) In order to curb this menace and prevent the establishment of Universities and institutions not covered by the relevant statutes a Task Force had been constituted in July, 1998 to examine the relevant provisions of the University Grants Commission Act, 1956 which need to be amended immediately and to provide proper safeguards against fake universities. According to the University Grants Commission the Task Force has *inter-alia* made the following sugestions relating to fake degrees and diplomas:

— Issue of code numbers to all Universities.